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FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

SECRETARY OF THE SENATE

Office use on

							Office ase only
	NAME OF COMMITTEE (in full)		(Check if name is changed)	Exa over	mple: If typying, type the lines	12FE4M5	
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ADD	RESS (number and street)	777	Summer St	111			
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	- '	Stan	nford			CT	06901 -
				CITY	,	STATE	ZIP CODE 📥
COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)							
	(Check if address is changed)	zam	ore@capcompl	iance.co	om Literatura		
				111			
COMMITTEE'S WEB PAGE ADDRESS (URL)							
П	(Check if address		11111	1 1 1	<u> </u>		
لسا	is changed)	ــــــا	11111	Ш.			
2. DATE MM / O D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete							
Type or Print Name of Treasurer Judith Zamore							
Signature of Treasurer Electronically Filed by Judith Zamore Date Date Date 2,011							
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS							
	Office Use Only				For further information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)